



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
EDUCATOR RECRUITMENT AND RETENTION
TRANSITION TO TEACHING PROJECT (TTP)
PEER COACHING/MENTORING APPLICATION

DIRECTIONS

Mail the completed form to: Educator Recruitment and Retention, Missouri Department of Elementary and Secondary Education, PO Box 480, Jefferson City, MO 65102

QUESTIONS: Contact Janet Goeller, 573-751-1191, jgoeller@mail.dese.state.mo.us

SECTION I: APPLICANT INFORMATION

SOCIAL SECURITY NUMBER (see disclosure notice on the back of this form)

NAME (LAST, FIRST, MIDDLE INITIAL)

STREET ADDRESS

CITY, STATE, ZIP CODE

E-MAIL ADDRESS

PHONE NUMBERS

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MOST RECENT TEACHING EXPERIENCE

DISTRICT NAME

DATES EMPLOYED
BEGINNING ENDING

GRADE LEVEL AND SUBJECT TAUGHT

SECTION II: NUMBER OF MENTEES

I am willing to mentor _____ number of participants.

ASSURANCES

I agree to attend mentor training, required meetings, provide mentoring to the mentees assigned to me, and complete required reports for each mentee. I will receive \$500 @ \$250 per semester per mentee per year (+ mileage if applicable)

I have attached a letter of recommendation attesting to my ability to be a mentor.

APPLICANT'S SIGNATURE

DATE